U.S. Department of Labor *Office of Labor-Management

washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
N 1215-0188
Ex i s 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

| | For Official Use Only | _ |
|---|-----------------------|---|
| | HC (NG192005) | |
| ! | E CAMS OFF | _ |

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

| 1. File Number U 14082 | 2. Fiscal Year Covered From: | | | | |
|--|---|--|--|--|--|
| | 1 / 1 / 5 Through: 1 / 5 / 5 / 5 / 5 / 5 / 5 / 5 / 5 / 5 / | | | | |
| 3. Name and address of person filing. | 4. Name, file number, and address of labor organization. | | | | |
| Name George # ORIANDO | Name See Attachments | | | | |
| | Labor Organization File Number | | | | |
| P.O. Box, Bldg., Room No., if any | P.O. Box, Building and Room Number, if any | | | | |
| Street 331/ Momas Street | Street | | | | |
| CILY STATEN ISLAND | City | | | | |
| State New York ZIP Code +4 10306 | State ZIP Code + 4 | | | | |
| 5. Position in labor organization. See Atticuments | | | | | |
| Enter appropriate data below if, during the past fiscal year, you or your spo | | | | | |
| | sions set forth in the instructions): derived income or other economic benefit of | | | | |
| A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizations. | sions set forth in the instructions): derived income or other economic benefit of | | | | |
| (except as specified in the exclusion A. Held an interest in, engaged in transactions (including loans) with, or | sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent. | | | | |
| A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any). | sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent. | | | | |
| A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. Name and address of Employer (including trade name, if any). | derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. | | | | |
| A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: | sions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent. | | | | |
| A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any | derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. | | | | |
| A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street | derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. | | | | |
| A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4 | derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. | | | | |
| A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization. 6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street City State ZiP Code +4 Sign 15. Signature and verification. The undersigned declares, under penalty of | derived income or other economic benefit of on represents or is actively seeking to represent. 7.a. Nature of Interest, Transaction, or Income. 7.b. Amount. 7.b. Amount. Perjury and other applicable penalties of the law, that all of the information ving documents), has been examined by the signatory and is, to the best of the | | | | |

Dale

Telephone Number

| Name of Person Filing George J. ORLANGO | | File Number U - | | | |
|--|--|--|--|--|--|
| B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. | | | | | |
| 8. Name and address of Business (including trade name, if any). | 9. Business deals with: | | | | |
| Name | | | | | |
| Trade Name, if any: | a. Labor Organiza | uon | | | |
| P.O. Box, Bldg., Room No., if any | c. Employer | | | | |
| Street | Samuel Control of the | | | | |
| City Company of the C | | | | | |
| State ZIP Code + 4 | | | | | |
| 10. If 9.b. or 9.c. is checked give trust or employer's name. | 11.a. Nature of such deali | ng. | | | |
| Name | | | | | |
| Trade Name, if any: | | | | | |
| P.O. Box, Bldg., Room No., if any | | | | | |
| Street | 11.b. Approximate dollar valu | ue of such dealing. | | | |
| City City | 12.a. Nature of interest held or income received, | | | | |
| State ZIP Code + 4 | Parties and the legis of the Control | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | 12.b. Amount. | A secretary and the second | | | |
| C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value. | | | | | |
| 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). | 14.a. Nature of payment. | | | | |
| Name See ATTACMMENTS | | | | | |
| Trade Name, if any: | | | | | |
| P.O. Box, Bldg., Room No., if any | | | | | |
| Street | | | | | |
| City | | | | | |
| State ZIP Code + 4 | to a set to the sequence of the second secon | | | | |
| 13.b. Is the Business an Employer or Consultant? | 14.b. Amount of payment. | | | | |

- George J. ORlando File Number: 000-056 12/31/04

Attachment 1

Item 4

United Food - Commercial Workers Taternational Union Distillery, Wine + Allied Workers Division 219 Paterson Avenue Little Falls, New Jersey, (07424)

- Division Director

PART C

13.a. Milliman, TNC.
ONE PENNSYLVANIA PLAZA, 38th Floor
New York, New York (10119)

13. b. Consultant - Vincent P. Reynolds, CEBS

14. a.b. Lunch - February 23 . \$50 (contract lons) Lunch - October 15 . \$34 (National Haw)

13. a Morgan Stanley Dean Witter 290 Brondhollon Rd. 4th Floor Melville, New York (11747)

13.6. Consultant - Gerald Chesin, Senior V.P.

14. a.b. Lunch - August 25 ... # 60 (National H+W)

George J. ORLANDO File Number: 012-289 12/31/04

Attachment 2

Item 4

Wine, Liquor + Distillery Workers Union Local 1-D 8402-18th Avenue

Brooklyn, New York (11214)

- President

PART C

See Above 13, a

13.b. Employer

14.a. Chaistmas Party

Local 1-1

MAjor Medical Plan - # 43. Pension Fund - # 16.

Severence Fund - # 8

14.6. \$ 122.00